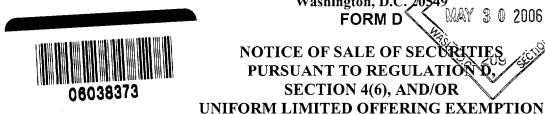
FORM D



UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

MAY 3 2006

OMB APPROVAL OMB Number: 3235-0076

April 30, 2008 Expires: Estimated average burden hours per response16.00

SEC USE ONLY **Prefix**

Serial DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATIÖN **SECTION 4(6), AND/OR**

FORM D

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Offer and Sale of Series A Preferred Stock Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 **⊠** Rule 506 ☐ Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Acureon Pharmaceuticals, Inc. Address of Executive Offices: Telephone Number (Including Code) (Number and Street, City, State, Zip Code) (610) 688-3025 409 Walker Road, Wayne, Pennsylvania, 19087 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Pharmaceuticals Type of Business Organization orporation limited partnership, already formed □ other (please specify): limited partnership, to be formed business trust Month Year 0 5 0 6 Actual or Estimated Date of Incorporation or Organization: Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) Е GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTI Enter the information requested for the following:	ne past five years; the vote or disposition of, 10	% or more of a cla		
Check Box(es) that Apply:	Executive Officer	□ Director	General	Partner
Full Name (Last name first, if individual)				
Gantz, Matthew J. Business or Residence Address (Number and Street, City, State, Zip Co	de)			
c/o Acureon Pharmaceuticals, Inc., 409 Walker Road, Wayne, Pennsylva	nia, 19087			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General	Partner
Full Name (Last name first, if individual) Mosconi, Giorgio				
Business or Residence Address (Number and Street, City, State, Zip Co	•			
c/o Acureon Pharmaceuticals, Inc., 409 Walker Road, Wayne, Pennsylvan	nia, 1908/			
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	B. INFORMATION ABOUT OFFERING			
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.	Y	es	No
2.	What is the minimum investment that will be accepted from any individual?	\$_		N/A
2	Does the offering permit joint ownership of a single unit?		es	No
3. 4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.			⊠
	N/A			
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEE	DS		
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		egate ng Price	Am	ount Already Sold
Debt	\$	-0-	\$	-0-
Equity	\$	0-	\$	-0-
☐ Common ☐ Preferred				
Convertible Securities (including warrants)	<u>\$- 3,000</u>	000.00-	<u>\$- 2</u>	,500,000.00-
Partnership Interests	\$	-0-	\$	-0-
Other (Specify)	\$	-0-	\$	-0-
Total	\$- 3,000	000.00-	<u>\$- 2</u>	,500,000.00-
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		nber	Do	Aggregate Ilar Amount
	Inve	stors	of	Purchases
Accredited Investors		1	<u>\$- 2</u>	,500,000.00-
Non-accredited Investors		0	\$	-0-
Total (for filings under Rule 504 only)	1	<u>V/A</u>		N/A
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
Type of Offering		e of urity	Do	llar Amount Sold
Rule 505		√/A	\$	N/A
Regulation A	1	√/A	\$	N/A
Rule 504		√A	\$	N/A
Total	<u> </u>	N/A	\$	N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees			S	-0-
Printing and Engraving Costs			\$ \$	-0- -40,000-
Accounting Fees			\$	-0-
Engineering Fees			\$ \$	-0-
Other Expenses (identify) Travel Expenses and Business Expenses			\$ \$	-40,000-
1014			J	-40,000-
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES ANI) USE (F PROCE	DS	
b. Enter the difference between the aggregate offering price given in response to Part C - Quest total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross to the user."	proceed	ls	<u>\$-</u>	2,960,000.00-
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to set forth in response to Part C - Question 4.b above.	he box t	0		
		Payments Officers Directors Affiliate	and	Payments to Others
Salaries and fees		\$0-		\$0-
Purchase of real estate		\$ <u>-0-</u>		\$0-
Purchase, rental or leasing and installation of machinery and equipment		\$ <u>-0-</u>		\$0-
Construction or leasing of plant buildings and facilities		\$		\$0-
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer	_	ф. О		
pursuant to a merger)		\$		\$ <u>-0-</u>
Repayment of indebtedness		\$0		\$0-
Working capital		\$ <u>-0-</u>	<u> </u>	2,960,000.00-
Other (specify):		\$ <u>-0-</u>		\$0-
Other (specify):		\$0-		\$0-
Column Totals		\$ <u>-0-</u>	<u> </u>	2,960,000.00-
Total Payments Listed (column totals added)		\boxtimes	\$ -2,960,000	.00-
				:
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	signed by the undersigned duly authorized person. If this notice is suer to furnish to the U.S. Sepurities and Exchange Commission,	
information furnished by the issuer to any non-a Issuer (Print or Type)	accredited investor pursuant to paragraph (b)(2) of Rule 502.	Date
Acureon Pharmaceuticals, Inc. Name of Signer (Print or Type) Giorgio Mosconi	Title of Signer (Print or Type) President, Treasurer, Secretary and Chief Operating	111AY 6 6066
	ATTENTION	
Intentional misstatements or on	nissions of fact constitute federal criminal violatio	ns. (See 18 U.S.C. 1001.)